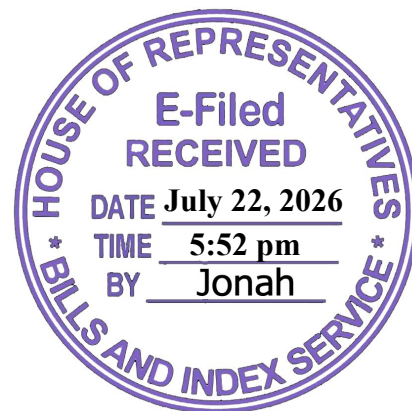




Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

Twentieth Congress
Second Regular Session

HOUSE BILL NO. 10202



Introduced by Representatives Ferdinand Martin G. Romualdez, Yedda Marie K. Romualdez, Andrew Julian K. Romualdez and Jude A. Acidre

AN ACT
REGISTERING LICENSED TRADITIONAL HEALERS AND
INTEGRATING SAFE HERBAL REMEDIES INTO THE PRIMARY
HEALTHCARE SYSTEM

EXPLANATORY NOTE

Traditional and complementary medicine continues to play an important role in the healthcare practices of many Filipino communities, particularly in rural and indigenous areas where culturally rooted healing systems and herbal remedies remain widely used and trusted. Traditional healers, medicinal plants, and indigenous wellness practices form part of the country's cultural heritage and community-based health traditions.

This bill seeks to strengthen the promotion, regulation, and integration of safe and evidence-informed traditional and complementary medicine into the national healthcare system consistent with Republic Act No. 8423 or the "Traditional and Alternative Medicine Act of 1997" and the Universal Health Care Act.

The measure establishes a national accreditation and registry system for traditional healers, promotes research and validation of herbal remedies, strengthens public health safeguards, and supports culturally sensitive and community-based healthcare approaches. It likewise provides mechanisms for training, monitoring, patient safety, and coordination between traditional practitioners and licensed healthcare professionals.

By promoting responsible and scientifically guided integration of traditional and complementary medicine, this measure aims to improve healthcare accessibility, preserve indigenous knowledge systems, support preventive wellness, and strengthen holistic public health services for Filipino communities.

In view of the foregoing, approval of this bill is earnestly requested.



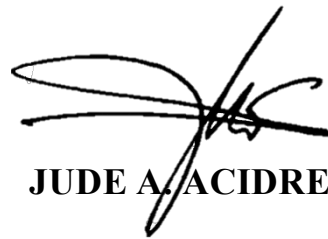
FERDINAND MARTIN G. ROMUALDEZ



YEDDA MARIE K. ROMUALDEZ



ANDREW JULIAN K. ROMUALDEZ



JUDE A. ACIDRE



Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

Twentieth Congress
Second Regular Session

HOUSE BILL NO. 10202

Introduced by Representatives Ferdinand Martin G. Romualdez, Yedda Marie K. Romualdez, Andrew Julian K. Romualdez and Jude A. Acidre

AN ACT
REGISTERING LICENSED TRADITIONAL HEALERS AND
INTEGRATING SAFE HERBAL REMEDIES INTO THE PRIMARY
HEALTHCARE SYSTEM

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

SECTION 1. *Short Title.* – This Act shall be known as the “Traditional and Complementary Medicine Promotion Act.”

SEC. 2. *Declaration of Policy.* – It is hereby declared the policy of the State to recognize, preserve, and promote safe, evidence-informed, culturally sensitive, and scientifically validated traditional and complementary healthcare practices as part of a holistic approach to public health and wellness.

The State shall strengthen the integration of appropriate traditional and complementary medicine into the national healthcare system consistent with

Republic Act No. 8423 or the “Traditional and Alternative Medicine Act (TAMA) of 1997,” the Universal Health Care Act, patient safety standards, and public health regulations.

The State shall likewise protect indigenous knowledge systems, promote responsible use of medicinal plants and traditional healing practices, and ensure that all complementary health services are subject to proper standards, accountability, and ethical safeguards.

SEC. 3. *Definition of Terms.* – For purposes of this Act, the following terms are hereby defined:

- a) “Traditional and Complementary Medicine (TCM)” refers to culturally rooted, indigenous, natural, alternative, complementary, and integrative healthcare practices recognized under Republic Act No. 8423 and related issuances.
- b) “Traditional Healers” refers to individuals recognized by their communities as practitioners of culturally rooted healing systems, including but not limited to *hilot*, *herbolaryo*, *albularyo*, indigenous healers, and other traditional wellness practitioners.
- c) “Herbal Remedies” refers to plant-based medicinal products or preparations derived from traditional knowledge, indigenous practices, or scientific research and approved or recognized by the Department of Health (DOH), Food and Drug Administration (FDA), or PITAHC.
- d) “Primary Health Care Facilities” refer to Barangay Health Stations (BHS), Rural Health Units (RHUs), health centers, and other government primary care facilities delivering first-contact healthcare services.
- e) “Evidence-Informed Practice” refers to traditional or complementary interventions supported by available scientific studies, documented

community practice, safety standards, or recognized public health guidance.

SEC. 4. *National Registry and Accreditation System for Traditional Healers.* –

The Department of Health (DOH), through the Philippine Institute of Traditional and Alternative Health Care (PITAHC), shall establish and maintain a National Registry and Accreditation System for Traditional Healers.

To qualify for registration, applicants must:

- a) Demonstrate recognized community-based healing practice or indigenous knowledge validated through appropriate local or cultural mechanisms;
- b) Complete orientation and training on public health standards, patient safety, sanitation, ethics, referrals, and prohibited medical claims;
- c) Comply with minimum standards and guidelines established by PITAHC and the DOH;
- d) Observe culturally respectful, ethical, and non-harmful healing practices.
- e) Accreditation shall not authorize traditional healers to perform acts reserved by law for licensed medical professionals.
- f) Certificates of accreditation shall be renewable every three (3) years subject to continuing education and compliance requirements.

SEC. 5. *Integration into Primary Healthcare Services.* – Primary healthcare facilities may, where appropriate and subject to DOH and PITAHC guidelines:

- a) Coordinate with accredited traditional healers for culturally sensitive wellness promotion, non-invasive complementary care, and community health education;
- b) Provide public education on safe and evidence-informed use of approved herbal remedies and complementary health practices;

- c) Incorporate approved herbal products and validated complementary interventions into community health programs consistent with existing laws and regulations;
- d) Facilitate referrals between traditional healers and licensed healthcare professionals when medically necessary.

The DOH and PITAHC shall develop training programs for healthcare workers and accredited traditional healers on integrative care, referral systems, public health standards, and patient safety.

SEC. 6. *Research, Validation, and Promotion of Herbal Remedies.* – The DOH and PITAHC, in coordination with the FDA, DOST, Commission on Higher Education (CHED), and research institutions, shall:

- a. Maintain and regularly update a national compendium of scientifically validated medicinal plants, herbal remedies, and complementary therapies;
- b. Support research, clinical studies, conservation, and sustainable cultivation of indigenous medicinal plants and traditional health knowledge systems;
- c. Promote public awareness campaigns on the proper and safe use of approved herbal remedies;
- d. Strengthen quality assurance, labeling standards, and public safety monitoring for herbal products;
- e. Facilitate responsible access to approved herbal medicines through government health facilities, accredited community pharmacies, and lawful distribution channels.

SEC. 7. *Protection Against Fraudulent and Harmful Practices.* No person shall:

- a) Falsely represent oneself as an accredited traditional healer;

- b) Claim to diagnose, cure, or treat serious medical conditions without lawful authority;
- c) Dispense unsafe, adulterated, unregistered, or prohibited herbal products;
- d) Discourage patients from seeking necessary medical treatment for serious or life-threatening conditions.

The DOH, FDA, and concerned agencies shall establish mechanisms for public complaints, monitoring, and enforcement against fraudulent or dangerous practices.

SEC. 8. *Appropriations.* – The amount necessary for the implementation of this Act shall be included in the annual appropriations of the Department of Health and PITAHC under the General Appropriations Act.

Local government units may provide supplemental funding, logistical support, training assistance, or facilities for local implementation.

The Program may also receive grants, donations, and research assistance from lawful domestic or international sources subject to existing laws and regulations.

SEC. 9. *Monitoring, Evaluation, and Accountability.* – The DOH and PITAHC shall:

- a) Develop standards and monitoring systems for accreditation, safety compliance, and public health integration;
- b) Submit annual reports to Congress on implementation, research progress, accredited practitioners, public health outcomes, and regulatory enforcement actions;

- c) Conduct periodic program reviews and impact assessments to ensure safety, effectiveness, and accountability.

SEC. 10. *Implementing Rules and Regulations.* – Within ninety (90) days from the effectivity of this Act, the DOH, PITAHC, and FDA, in consultation with indigenous cultural communities, accredited traditional healers, medical associations, academic institutions, and other stakeholders, shall promulgate the necessary rules and regulations.

SEC. 11. *Separability Clause.* – If any provision or part of this Act is declared unconstitutional or invalid, the remaining provisions not affected thereby shall remain in full force and effect.

SEC. 12. *Repealing Clause.* – All laws, decrees, executive orders, rules, and regulations inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SEC. 13. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,